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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input type="checkbox"/> Fed. <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. LC-029410(B)
7. Unit Agreement Name MCA
8. Farm or Lease Name MCA Unit #2
9. Well No. 295
10. Field and Pool, or Wildcat Majamar G/SA
12. County Lea

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator CONOCO INC.
3. Address of Operator P. O. Box 460, Hobbs, N.M. 88240
4. Location of Well UNIT LETTER <u>I</u> , <u>1345</u> FEET FROM THE <u>South</u> LINE AND <u>25</u> FEET FROM THE <u>East</u> LINE, SECTION <u>30</u> TOWNSHIP <u>17S</u> RANGE <u>32E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <u>shut off surface wtrflw</u> <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

- ① MIRU
- ② Rig up pmp truck to bradenhead valve
- ③ Run tracer survey
- ④ Bradenhead sqz the csq-csq annulus as follows:
 - a. Lead-in w/ 2bbls salt saturated brine
 - b. pmp a 2bbl fresh wtr cushion
 - c. pmp 20 bbls Flo-Chek
 - d. Tail-in w/ 180 sxs class "H" cmt
- ⑤ Displace cmt thru wellhead w/ fresh wtr
- ⑥ Return MCA #295 to prod.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Kevin L. Vogel TITLE Administrative Supervisor DATE 11-15-85
 ORIGINAL SIGNED BY JOEY SEXTON
 DISTRICT 1 SUPERVISOR
 APPROVED BY _____ TITLE _____ DATE _____
 MCA#N-HOBBS(3)File

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REC'D
HOBBS OFFICE